

TRANSMITTAL SLIP		DATE 3 Nov 58
TO: <i>Chief, D/S</i>		
ROOM NO.	BUILDING	
REMARKS: <i>S/TD Monthly Report for October is attached in duplicate.</i>		
FROM: <i>Chief, S/TD</i>		
ROOM NO.	BUILDING	EXTENSION

FORM NO. 241
1 FEB 55REPLACES FORM 36-8
WHICH MAY BE USED.

(47)